



NEVADA DEPARTMENT OF AGRICULTURE
Organic Certification Program
RENEWAL FORM FOR HANDLERS:
PROCESSOR / DISTRIBUTOR / RETAILER



This application should be completed by the person applying for renewal of certification to process, distribute or retail organic products in Nevada. See the Nevada Organic Certification Handbook or call (775) 688-1182 extension 243 if you have questions. **Renewal applications must be received by March 1st to avoid late charges.**

Mail completed application form and fee to:

NDA / Organic Certification
350 Capitol Hill
Reno, Nevada 89502

Applications received without application fee will be returned

Incomplete or inaccurate applications and/or supporting documentation may result in return of application or denial of certification.

BUSINESS INFORMATION List all corporate officers and offices, partners, etc. Add additional pages if necessary

Name (or names) _____

Business / Farm Name _____

Contact Person (name and title) _____

Address of Farm or Business _____

City _____ State _____ Zip _____

Phone _____ Fax _____ E-mail _____

TYPE OF APPLICATION – Check all that apply.

☐ Annual **Renewal** Application ☐ **Change** In Classification

☐ **Addition** of facilities Explain _____

CERTIFICATION CLASSIFICATION AND FEE FOR RENEWING APPLICANTS

Renew Fee

- | | |
|---|-----------|
| <input type="checkbox"/> Certified Producer with On-Farm Processing. If you handle only your own certified ingredients and are a NDA certified producer, you pay only the Producer Certification fee | \$ exempt |
| <input type="checkbox"/> Certified Producer with On-Farm processing facilities handling certified ingredients other than your own | \$100.00 |
| <input type="checkbox"/> Commercial Food, Feed or Fiber Processor | \$100.00 |
| <input type="checkbox"/> Wholesale/Warehouse/Storage | \$100.00 |
| <input type="checkbox"/> Retailer re-packing or processing | \$100.00 |
| <input type="checkbox"/> Packing/Grading/Sizing/Cleaning | \$100.00 |
| <input type="checkbox"/> Broker / Trader | \$100.00 |

Renewal fees are non-refundable.

Do you handle **both** organic and non-organic products?

☐ Yes ☐ No

Have you obtained additional certification with an organic certifying agent such as CCOF, OCIA, etc.? ☐ Yes ☐ No

If yes, which organic certifying agency? _____

What is their phone number? _____

When was your facility last inspected by this agency? __/__/__

Who is your contact person there? _____

SUPPORTING DOCUMENTATION If there are changes from the previous year, please check where appropriate and attach detailed descriptions for all that apply. If there are no changes, proceed to Sanitation Section and complete application from that point.

- ☐ physical facilities, including floor plans
- ☐ handling and processing operation, including the types of organic product processed, distributed or sold.
- ☐ critical control points of potential commingling
- ☐ internal record-keeping system
- ☐ receiving/storage areas
- ☐ shipping/storage areas
- ☐ transportation arrangements or equipment
- ☐ packing and grading areas and equipment
- ☐ packaging materials

Sanitation

Check methods and/or materials used for sanitation and/or cleaning:

- | | | |
|--|---|--|
| <input type="checkbox"/> alcohol | <input type="checkbox"/> allowed bleaches | <input type="checkbox"/> allowed detergents and/or soaps |
| <input type="checkbox"/> soda ash | <input type="checkbox"/> calcium lignosulfate | <input type="checkbox"/> hydrogen peroxide |
| <input type="checkbox"/> citric acid | <input type="checkbox"/> caustic soda | <input type="checkbox"/> iodine |
| <input type="checkbox"/> sulfuric or hydrochloric acid | <input type="checkbox"/> other | _____ |

List the products used last year for sanitation and cleaning. Attach additional pages if necessary.

Product	Describe Use

Describe how organic products are protected from contamination by prohibited materials used in sanitation and cleaning. _____

Pest Management

Check pest management methods used:

- | | | |
|---|--|--|
| <input type="checkbox"/> sanitation | <input type="checkbox"/> physical barriers | <input type="checkbox"/> insect/rodent traps |
| <input type="checkbox"/> sticky traps/baits | <input type="checkbox"/> beneficial insects | <input type="checkbox"/> biological control |
| <input type="checkbox"/> pheromone traps | <input type="checkbox"/> botanical insecticides | <input type="checkbox"/> microbial or viral insecticides |
| <input type="checkbox"/> soaps and/or oils | <input type="checkbox"/> diatomaceous earth (DE) | <input type="checkbox"/> aeration/ventilation |
| <input type="checkbox"/> allowed fumigation | <input type="checkbox"/> other _____ | |

List the products used last year for control of insects, rodents, etc. Attach additional pages if necessary.

Product Used	Describe Use

Describe how organic products are protected from contamination of prohibited materials used in control of insects, rodents, etc. _____

Pest control methods and materials are managed and/or applied by a:

- ☐ designated employee or department ☐ self
- ☐ licensed commercial pest control service. Company name: _____

Post-Harvest Treatment

Check materials used for post-harvest applications for disease management or spoilage.

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> copper hydroxide | <input type="checkbox"/> copper sulfate | <input type="checkbox"/> cupric oxide | <input type="checkbox"/> tri-basic copper |
| <input type="checkbox"/> hydrated lime | <input type="checkbox"/> elemental or dry sulfur | <input type="checkbox"/> liquid sulfur | <input type="checkbox"/> Bordeaux mixture |
| <input type="checkbox"/> lime sulfur (calcium polysulfide) | <input type="checkbox"/> allowed bleaches | <input type="checkbox"/> allowed waxes | |
| <input type="checkbox"/> other: _____ | | | |

List materials used for post-harvest applications for disease management or spoilage. Attach additional pages if necessary.

Product	Describe Use

Please describe how organic products are protected from contamination of prohibited materials used in post-harvest treatments to control spoilage or diseases _____

PRODUCT INGREDIENTS AND LABELING

Attach copies of labels for new products you wish to label as organic this year (if applicable).

Are any of the following ingredients used in your new products?

_____ Sulfites	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____ Nitrates	<input type="checkbox"/> Yes	<input type="checkbox"/> No
_____ Nitrites	<input type="checkbox"/> Yes	<input type="checkbox"/> No

RECORD-KEEPING The following records will be audited during your renewal inspection this year (where applicable). Please make sure they are available for the inspector.

- ☐ names and addresses of suppliers, including producers, processors and other distributors
- ☐ purchasing records of certified products, including dates of purchase, invoice numbers and volumes
- ☐ proof of certifications for organic products purchased
- ☐ records regarding each stage of handling and processing for each lot, bin or volume of products
- ☐ routine quality control inspections, reports and evaluations
- ☐ current inventory of ingredients for processing
- ☐ current inventory of products for distribution
- ☐ sales and/or shipping records of certified products
- ☐ records indicating water used on certified products and discharge water meet city, state or federal Safe Drinking Water Act requirements
- ☐ records indicating approval of city, state or federal health code requirements

You may attach any additional information about your operation, including brochures, advertisements, newspaper articles, etc.

Applications received without a signed affidavit will be returned.

- ◆ All verification documents required by the Nevada Department of Agriculture Organic Certification Program, Chapter 587 of the Nevada Administrative Code and submitted to the Nevada Department of Agriculture in support of my application for certification or re-certification contain and will contain only true, accurate and complete information about my operation.
- ◆ All oral statements and written records made available to NDA in connection with inspections of my operation are and will be true, accurate and complete.
- ◆ All goods produced and/or marketed under a NDA Certified Organic certificate and logo will be produced, handled and sold in accordance with the standards set out in Nevada Revised Statutes 587 and Chapter 587 of the Nevada Administrative Code.
- ◆ I have read and agree to be bound by all provisions of the Nevada Organic Certification Program applicable to the production, handling, and sales of organic food, feed, livestock, or fiber.

Date _____

State of _____)
)
County of _____) SS

Notary Public